

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MATHESON FOR CONGRESS

Mailing Address PO BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.61760

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MATHESON FOR CONGRESS

Mailing Address PO BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.61763

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 MADISON AVE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.61728

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)